

## Haverhill

License Commission, Room 118 Phone: 978-420-3623 Fax: 978-373-8490 License\_comm@cityofhaverhill.com

## OUTDOOR DINING PERMIT APPLICATION

LICENSEE NAME:		
	LLC, CORPORATITION, OR SOLE P	ROPRIETOR'S NAMI
APPLICANT'S D/B/A:		
Business Address:		
BUSINESS TELEPHONE:		
CONTACT PERSON:		
CONTACT'S TELEPHONE: _		
CONTACT'S EMAIL:		
CONTACT'S MAILING ADDRESS:		
FEE: \$100 Is this a renewal to	for a license granted in a prior year:Y	es _No
Number of Outdoor Seats:_		
Number of Outdoor Tables:		
PROPOSED DATES OF OUTDOOR	DINING:	
	AVAILABLE MARCH 1 <sup>st</sup> TO	October 31 <sup>st</sup>
DOES THIS LOCATION HOLD AN	ALCOHOLIC BEVERAGES LICENSE:	_Yes _No
	t the above information is true and that named a lating to taxes, reporting of employees and contra	
SIGNATURE:	DATE	



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## **OFFICE USE ONLY**

Official Use ONLY:		TIME ST	AMP
FEE: \$	PAID: \$		
Issued:	LIC#:		
Approval/Commentary			
COMMENTS:		COMMENTS:	
Chief of Police	Date	Mayor	Date
_			
COMMENTS:		COMMENTS:	
Health and Inspectional	Date		
Services		Superintendent Highways	Date
COMMENTS:		APPROVAL OF LICENSE COMMISSION	
Engine agrica Donautor and	Doto	Data	
Engineering Department	Date	Date	